

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 831018	RECEIPT DATE:	05 / 04 / 01
IA NUMBER:	PCT/ US00 / 41057	IA FILING DATE:	10 / 04 / 99
FAMILY NAME:	KOON	DELAY WAIVED (Y/N):	Y
GIVEN NAME:		DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	10 / 14 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	723-1075	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 7038164000
			FAX

NAME: ALAN M KAGEN
 NIXON & VANDERHYE
 STREET: 1100 NORTH GLEBE ROAD
 8TH FLOOR
 CITY: ARLINGTON
 STATE/COUNTRY: VA ZIP: 222014714
 EMAIL:
 APPLICATION TITLES:

SERIAL NUMBER MASK AND CHECK DIGIT FOR ELECTRONIC REGISTRATION SYSTEM
 (ERS)

TAB TO LAST POSITION,PUSH SEND